

Testimony to the Public Health Committee, February 21, 2007

**On SB # 688 (COMM) AN ACT CONCERNING STATE ENHANCEMENT TO THE
FEDERAL SPECIAL SUPPLEMENTAL FOOD PROGRAM FOR WOMEN, INFANTS
AND CHILDREN.**

From the Middlesex Coalition for Children

Chairman Handley, members of the Public Health Committee, my name is Betsy Morgan. I am director of the Middlesex Coalition for Children, and co-chair, with the Mayor of Middletown, of the Coalition's Task Force on Childhood Hunger.

The Coalition and the Childhood Hunger Task Force strongly urge you to **support** SB #688.

The WIC program is one of the most valuable and successful programs for young mothers and children in Middlesex County, Connecticut and the nation. For over 30 years, the WIC Program has helped reduce infant mortality, decreased the incidence of low birth weight babies, decreased anemia in our young moms and children, promoted routine health screenings and ongoing prenatal care, encouraged breastfeeding and helped prevent child obesity. WIC provides much more than supplemental foods and nutrition education. WIC functions as our most important referral network to other health and human service programs, enabling financially stressed young families to gain self-sufficiency.

Connecticut has not supported WIC as well as other states. In Connecticut the WIC Program is solely funded by federal dollars. Other states contribute state funds to their WIC Programs. Massachusetts contributed \$12 million and New York contributed \$20 million to their respective programs last year. WIC food funding has shown a modest increase whereas WIC administrative funding has remained essentially the same over the past six years. This shortfall of administrative funding has seriously hampered the delivery of WIC public health services. Fewer clients are being seen, outreach activities have been reduced or eliminated, and scheduling for certification, re-certifications and nutritional counseling has been delayed

WIC's host agencies have tried to offset some of the financial shortages by supplying in-kind services. The State of Connecticut has also sought to defray some of this burden by periodic waivers of the indirect cost charges against WIC. These measures have served as temporary fixes to a much larger problem that can no longer be ignored. Without adequate funding, WIC cannot continue to serve its many clients. In Connecticut, that means a reduction in services to over 51,000 of our most vulnerable citizens, young moms, infants and young children.

The WIC Program has been proven to aid in improving cognitive development, increasing immunization rates, bolstering school readiness and reducing health care costs for low income women, infants and children. It is one of the most successful public health **prevention** ever developed. Connecticut's investment in WIC will pay off handsomely.

WIC's contraction in Connecticut has reached a crisis stage. The State needs to do what other progressive states do, and supplement federal funding.

Thank you for this opportunity to testify.